

guide Medicare's decisions on coverage and payment for new technologies to improve the lives of people with diabetes.

I have had the opportunity to see the challenges that families with members who have type 1 diabetes face. My granddaughter, my oldest granddaughter, has type 1 diabetes, and I know the challenges her family faces navigating a complex web of insurance coverage rules for technologies. Anytime a new technology comes out that would benefit her, to get the insurance companies to adopt those technologies is a huge challenge, and it requires hours of phone time with the insurance company, trying to persuade them that they should provide the coverage.

Well, we know that these insurance companies often base their coverage and reimbursement rules on Medicare. That is why it is so important for the Medicare Program to keep pace with the development of new diabetes technologies and devices.

I appreciate the opportunity to work with Senator COLLINS on a regular basis in the Diabetes Caucus. In 2017, we were successful in pressing Medicare to cover continuous glucose monitors, something that seems like an obvious choice given the difference that those CGMs can make for people who have diabetes and ensuring that their blood sugar stays stable. We have also worked together to ensure that Medicare provides flexibility so that patients can use smartphone apps with their continuous glucose monitors.

In the years to come, we need Medicare to make progress toward covering the artificial pancreas, a landmark development that will be the most significant change for people with diabetes since insulin was discovered, but to do this, we shouldn't have to resign ourselves to this piecemeal approach to Medicare coverage that requires continual pressure from Congress and advocates.

We need an independent body, like the one that is identified in our legislation, to help provide recommendations to Medicare so that its coverage of new technologies can adapt more quickly as innovation advances. That is why I am proud to be here on the floor and proud to join Senator COLLINS in reintroducing this bill. I hope my colleagues will take a look at it, decide that it merits passage, and work with us to get that done.

My colleague has arrived on the floor.

Senator COLLINS, I was just saying that I was very proud to be able to join you in reintroducing this legislation, and hopefully this session, we will be able to get it done. Thank you for your leadership, and I look forward to hearing your comments and to working to get this passed.

The PRESIDING OFFICER. The Senator from Maine.

Ms. COLLINS. Mr. President, first, let me thank my colleague from New Hampshire, Senator SHAHEEN, for her

extraordinary commitment and leadership as my fellow cochair of the Senate Diabetes Caucus. We are introducing a bill to improve access to innovative diabetes technologies for our seniors and other Medicare beneficiaries. Our bill would create a special task force at the Department of Health and Human Services to examine and resolve barriers that seniors face in accessing the latest diabetes management technologies.

New diabetes technologies, such as the artificial pancreas and implantable continuous glucose monitoring systems, allow those who are living with diabetes to better manage their glycemic levels, assess needed therapy on a timely basis, and adhere better to treatment regimes. These technological advances make diabetes easier to manage and therefore improve the health of people with diabetes.

The market arrival of cutting-edge diabetes technologies is something we all celebrate; however, oftentimes we are finding that patients do not realize the full benefits because many of our Nation's seniors find the new technologies to be difficult or impossible for them to afford.

I have heard from numerous seniors who, when transitioning from employer-provided insurance to Medicare, were shocked to learn that the technologies they had relied upon for years to manage their diabetes are no longer covered because they now have lost their employer-provided insurance, which did cover these technologies, and instead are being covered by Medicare. For example, one Mainer unfortunately had to face the reality that Medicare's coverage denial of a particular sensor that he needed for his insulin pump meant paying up to \$8,000 out-of-pocket each year if he wants to continue with his current treatment. He wrote:

Because I am now 65, I am denied care that was available when I was 64.

He continued:

This approach not only puts me at risk but is quite likely not cost effective. While the sensors are expensive, the cost of ambulance calls and hospitalizations . . . is certainly more.

I could not say it better. It makes no sense for this individual, who has aged into the Medicare system, to lose coverage that he had and relied upon and used successfully to control his diabetes.

To better support the adoption of these technologies, our bill would require HHS to create a special task force on coverage and payment for innovative diabetes technologies that would bring all stakeholders—from patients to device manufacturers, to government officials and healthcare professionals who are making coverage decisions—to the table. The task force would identify and plan for changes in Medicare coverage and payment policies to ensure that Medicare beneficiaries have access to the latest treatments, to the innovations that are currently available, as well as those

that are in the pipeline. The task force would also be tasked with developing strategies for supporting adoption of these technologies.

This effort builds on our past advocacy to improve the day-to-day life of individuals with diabetes. In January 2017, in response to the bipartisan effort that Senator SHAHEEN and I have led, CMS first approved the use of continuous glucose monitors. We also successfully urged CMS last year to support the use of smartphone apps in conjunction with continuous glucose monitors. These are proven lifesaving devices that are relied upon by people with diabetes to provide them with realtime measurements of their glucose levels. This information is key to preventing costly—sometimes deadly—diabetes complications.

While I am pleased that our advocacy has helped spur these policy changes, I remain frustrated that too often Medicare lags behind commercial insurers. Greater adoption of these new diabetes techniques can help address the explosive growth in the financial and human toll of diabetes. Diabetes accounts for an extraordinary one-in-three dollars in Medicare spending. It is paramount that we encourage HHS to adopt a more cost-effective and compassionate approach to treating this chronic disease that affects more than 30 million Americans.

The Improving Medicare Beneficiary Access to Innovative Diabetes Technologies Act encourages a proactive approach to diabetes coverage and payment. I encourage my colleagues to support our efforts.

Again, thanks to my partner Senator SHAHEEN for her leadership in this area.

ORDERS FOR TUESDAY, JUNE 22, 2021

Mr. SCHUMER. Madam President, I ask unanimous consent that when the Senate completes its business today, it adjourn until 10 a.m., Tuesday, June 22; that following the prayer and pledge, the morning hour be deemed expired, the Journal of proceedings be approved to date, the time for the two leaders be reserved for their use later in the day, and morning business be closed; further, that upon conclusion of morning business, the Senate proceed to executive session to resume consideration of the Fonzzone nomination, postcloture; that the postcloture debate time expire at 11:45 a.m.; further, that the Senate recess following the cloture vote on the Ahuja nomination until 2:15 p.m. to allow for the weekly caucus meetings; that if cloture is invoked on the Ahuja nomination, all postcloture time expire at 2:30 p.m.; further, that following the disposition of the Ahuja nomination, the Senate proceed to legislative session and resume consideration of the motion to proceed to S. 2093, with the time until 5:30 p.m. equally divided between the two leaders or their designees; that the cloture motion on the

motion to proceed to S. 2093 ripen at 5:30; and finally, that if any of the nominations are confirmed, the motions to reconsider be considered made and laid upon the table with no intervening action or debate.

The PRESIDING OFFICER. Without objection, it is so ordered.

ORDER FOR ADJOURNMENT

Mr. SCHUMER. Madam President, if there is no further business to come before the Senate, I ask it stand adjourned under the previous order, following the remarks of Senator WHITEHOUSE.

The PRESIDING OFFICER. Without objection, it is so ordered.

The PRESIDING OFFICER. The Senator from Rhode Island.

FOR THE PEOPLE ACT OF 2021

Mr. WHITEHOUSE. Madam President, I want to speak briefly this evening about S. 1, the Senate version of H.R. 1, the democracy reform bill that we are going to be considering moving to proceed to this week, and I hope we will be able to show a unified Democratic Caucus moving to proceed.

It is often described as the voting rights bill, and it is described that way with good justification because there are some very, very important protections that are built into it to protect the voting rights of Americans which are under, I would say, a unique and historic threat now since the, perhaps, 1950s and 1960s, when the Voting Rights Act was passed and some of the levers that were pulled to keep certain people from voting had to be stopped and the vote and the ballot became available much more broadly and led to a much more just society.

But that is not the only part of S. 1. In fact, in my view, it is not even the central part of S. 1. In my view, the central part of S. 1 is getting big, unlimited, anonymous money out of politics.

Now, the two relate because the big, anonymous money schemers that are up to no good in politics are focusing on—guess what? Voter suppression. And, in fact, the same individual, the same person who was running the dark money scheme to control and capture the Supreme Court and the circuit courts has—after being somewhat blown up by a Washington Post expose about the \$250 million he was running in dark money through this court-capture scheme—jumped from court-capture scheme, and where did he land? On something rather ironically called the Honest Elections Project, which immediately went to work to file lawsuits and harass election officials and try to make sure that voter suppression took place.

If you think that is a coincidence, the Honest Elections Project is actually a rebrand of an entity that was called the Judicial Education Project—basically, just a name change through

corporate hijinks. And that Judicial Education Project is the corporate sibling of something called the Judicial Crisis Network.

And guess what the Judicial Crisis Network did? For this same guy, before he jumped to voter suppression, when he was still doing court capture, the Judicial Crisis Network took the big, fat checks that anonymous donors wrote to pay for the TV campaigns—the dark money TV campaigns—against Garland and for Gorsuch in the first appointment, for Kavanaugh through all of his troubles in the second appointment, and then for Judge Barrett on the eve of the election in the third appointment.

So, you see, it is the same person and the same organizational connection between the court-captured dark money scheme and the voter suppression dark money scheme. It is actually happening in kind of plain light of day, except that we don't pay enough attention to the links.

So this dark money business, getting the big, dark money out of politics, is a big, big deal. And I wanted to share how much of a deal it is to Americans. Dark money corruption polls at the top of all the issues in the last poll I saw. It is the No. 1 issue. If you ask people: If somebody says that they have dedicated themselves to fighting corruption, is that going to make you more likely to vote for them or more likely for you to vote for their opponent? Among all voters, it is 89 to 1 more likely to vote for the candidate dedicated to fighting corruption versus whoever this one is who said, no, not such a big deal to me.

Among independent voters whom the two parties always fight for in elections, 82 to 2—82 percent of independent voters would be more likely to vote for somebody who they see as dedicated to fighting corruption, and only 2 would be more likely to vote for their opponent.

So this is a strong public signal that we are sick of it. And you see it over and over again. This is one poll. You can go through poll after poll after poll, and you see people want the dark money out of politics. They think we are controlled by big special interests. They think much too much stuff gets done behind the scenes.

And, by the way, we just got a little window into the private conversations about this that take place between the Koch brothers' political apparatus and our minority leader, MITCH MCCONNELL's political apparatus.

Jane Mayer wrote about this recently in the New Yorker. And the Koch political apparatus and the MITCH MCCONNELL political apparatus were being briefed on this bill, on S. 1, and on these provisions. And what they were told by the pollster is: Do you know what? We are in big trouble because our conservative voters hate this damn dark money stuff just as badly as those liberals do, and we have tried all these different ways to reframe this, to

make it look bad so they might be more against it—none of it worked. None of it worked.

People want their government cleaned up. They are sick to death of big special interest money, and they are particularly sick to death of big special interest money that hides behind fake front groups. So it is not ExxonMobil or Marathon Petroleum that comes to Rhode Island and says, SHELDON WHITEHOUSE is a bum, you should vote against him. No, it is under the phony group with a name like Rhode Islanders for Peace and Puppies in Prosperity. And all they are is a mail drop.

Somebody is behind them, and the voters know in Rhode Island there is no Rhode Islanders for Peace and Puppies in Prosperity. They know they are being had, and they are sick of seeing the ads. And it is not fair to them, as citizens, to not know what is going on in the American governmental process, going on right in front of them.

And it matters to them. It really matters to them. It is the single most important issue for 55 percent of all voters. And among the independent voters we are trying to attract to our separate parties, 58 percent of independent voters, this question of Big Money corruption and government not listening to them, it is the single most important issue—the single most important issue.

Now, make it top three, expand the question. What are the top three most important issues that you care about? Eighty-nine percent of all voters have this in their top three. Eighty-eight percent of independent voters have this in their top three. So let's say you have a real concern about healthcare, or let's say you have a real concern about voting rights, or let's say you have a real concern about the economy—never mind, this is still there in that top three for pretty much 9 out of every 10 Americans.

And what is the level of concern? Very concerned. Very concerned is 86 percent of all voters and 92 percent of all independent voters. About this issue of corruption and money in politics, how concerned are you? Eighty-six percent of all voters said very. Ninety-two percent of independent voters said very.

And if you say: OK, let's, again, expand the aperture a little, very concerned or somewhat concerned? Are you very concerned or somewhat concerned about this dark money corruption, special interest pressure in government—98 percent of all voters, 100 percent of independent voters. I don't know about you all, but I have looked at a lot of polling in my life. Seeing a 100-percent number, that is rare. Every single independent voter polled is very or somewhat concerned about corruption in our democracy.

So I can't wait to get onto S. 1. And if our Republican friends want to filibuster it and stop us from moving forward, I can't wait to see them explain